FOR INSTRUCTIONS, SEE BACK OF FORM			/
en e		FORM	
DISCLOSURE SUMMARY PAGE		DR-2 (Rev. 01/98)	DISCLOSURL REPORT
IA CTUO			
COMMITTEE NAME (Must be same as on Statement of Organistic)	4	For Office Use O Comm. #	<u>nly</u>
COMMITTEE NAME (Must be same as on Statement of Organization) Demmer For Supervisor 2003 007 22 AMIO:		Indexed	
	39	Audited	
IMPORTANT: Indicate type of committee you are reporting for:		Computer	
(1)Statewide/Legislative Candidate (2)Statewide PAC (3)State Party (4)County/Local Candidate (5)County PAC (6)Ballot Issue/Franchise Committee (7)County/City Central Committee (8)Support State of Candidates			
1 per Harres 563-876-9736		Ot 1	72008
SIGNATURE OF TREASURER (or person filing this report) TELEPHONE		DATE S	KENED
Routine Penalties Due For Late Filed Reports Range fro	m \$	20 to \$800	
SEE INSTRUCTIONS ON BACK AND COMPLETE THE FOLLOWING SENTENCE:			
TEL OIL OR AIVA (1) ELECT	IÓN	/(2)NON-ELECT	ION YEAR.
(report date) Indica	ate o	ne 🖊	
☐CHECK IF AMENDMENT TO REPORT DATED	cal Co	ommittees, enter Da	ate of Election
Check if this is final (termination) report and attach Notice of Dissolution Form DR-3.	unty 8	& Local Committees	s, enter County in
(You must continue to file reports until a Notice of Dissolution is filed.)	ich Ei	ection is held	
STATEMENT OF CASH ON HAND			
CASH ON HAND at the beginning of the reporting period. (This is the total			•
of all monies held by the committee. This amount MUST be the			•
same as the cash on hand at the end of the last reporting period, or must be zero if this is first report filed.)	_		97.89
ADD TOTAL MONEY TAKEN IN THIS PERIOD	\$		11.01
Schedule A: Cash Contributions total (Attach Schedule A)			00.00
Schedule F: Loans Received total (Attach Schedule F)			
Schedule H: Total Sales of Campaign Property (Attach Schedule H)	······ '		,
(Schedule H applies to Candidates' Committees Only)			× 11
SUB-TOTAL.	\$	37	77.89
SUBTRACT TOTAL MONEY SPENT THIS PERIOD			
Schedule B: Expenditures total (Attach Schedule B)			<u> 30.00 </u>
Schedule F: Loan Repayments total (Attach Schedule F)	••••		
CASH ON HAND at the end of this reporting period (if final report, balance must be zero) (Attach DR-3)	\$_	#46	7.89
		. •	
UNPAID BILLS (From Schedule D - Attach Schedule D)			
IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)			
OUTSTANDING LOANS (From Schedule F - Attach Schedule F)	\$		
CANDIDATE COMMITTEES ONLY:		••	
CONSULTANT BREAKDOWN (Schedule G Attached?)		YES	NO-
VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)			

(Inciu	uding candidate's personal	funds)			(Rev. 06/9	7) RECE	EIPTS
COMMITTEE	E NAME (Must be san	ne as on Statement of Orga	agrization)		С	HECK THIS E	BOX IF
Dom	in ein fin	Superisor	anization)		IA.	MENDING FO	DRM
				L			
NUMBER AND TH DISCLOSURE BO	HE PAC CHECK NUMBER IN JARD.	RIBUTION IS RECEIVED FROM A N THE DESIGNATED COLUMN.	A STATE PAC (POLITICAL ACTION A LIST OF ID NUMBERS IS AVAILA	I COMMITTEE), LI ABLE FROM THE	ST THE PAC I	DENTIFICATIO 3 AND CAMPAI)N IGN
CAUTION: Sector for any comme	ction 68B.32A(6), Iowa rcial purpose by any pe	a Code, prohibits the use of i erson other than statutory po	information copied from repor olitical committees.	rts and stateme	ents for solic	ating contribu	utionsr
DATE RECEIVED	PAC ID NUMBER	NAME AND ADDR	RESS OF CONTRIBUTOR	RELATION		AMOUNT	√ IF F
(MM/DD/YR)	(if applicable) AND PAC CHECK NUMBER			TO CANDII	DATE* F	RECEIVED	FUNE RAISE
0 + 10	ID#	M. I. V.	men Ll				INCOM
Oct 10	CK#	Neal + Kaic 1	McDermott si + Exouth, Ia	1) Nine	. \$	100.00	
A +17	ID#	Pl /2 100	C 11 1				-
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	CK#						<i>)</i>
				SUB-TOTAL	1	. 1,0,	·····
			TOTAL (if last page	e of this sched	s X	00. 100	•
narriage) (See Page	nship must be shown to the e 2 of forms packet.). If st	te third degree of consanguinity	of any relative making a contributi y (blood relatives) and affinity (rela same as candidate, but there is	latives by	<u> </u>	1	J
amilial relationship	, enter "not applicable" ir	n the relationship column.	and as oundading not more to	110	Page(for	r Schedule A)	,

SCHEDULE

MONETARY

For Instructions, See Back of Form

CONTRIBUTIONS - MONEY TAKEN IN

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 09/97)	MONETARY EXPENDITURES			
CHECK THIS BOX IF AMENDING FORM				

COMMITTI	EE NAME (Must be	same as on Statement of Organization)		
Denner for Superison				
DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
10-14-08	ID# CK#	Telegraph-Herald	Politial Ad	\$ 130.1W
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41-4 · · · · · · · · · · · · · · · · · · ·	ID#		The state of the s	* * * * * * * * * * * * * * * * * * * *
	CK#			
	ID#			
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	<u> </u>	The state of the s	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
* #			SUB-TOTAL	\$ 130 00

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and lowa Code 56.6(3)(i).)

Page	/_ of	
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TOTAL (if last page of this schedule)